

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/567,699
Filing Date	February 3, 2006
First Named Inventor	Gianni Savi
Art Unit	Unknown
Examiner Name	Unknown
Attorney Docket Number	NOTAR-031US

**ENCLOSURES (Check all that apply)**

- |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input checked="" type="checkbox"/> Information Disclosure Statement<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Reply to Missing Parts/<br>Incomplete Application<br><input type="checkbox"/> Reply to Missing Parts<br>under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a<br>Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation<br>Change of Correspondence Address<br><br><input type="checkbox"/> Terminal Disclaimer<br><br><input type="checkbox"/> Request for Refund<br><br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><br><input type="checkbox"/> Appeal Communication to Board<br>of Appeals and Interferences<br><br><input type="checkbox"/> Appeal Communication to TC<br>(Appeal Notice, Brief, Reply Brief)<br><br><input type="checkbox"/> Proprietary Information<br><br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify<br>below):<br>- Form PTO/SB/08B (in duplicate)<br>- Prior Art (5 non patent literature)<br>- Return postcard |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

Remarks

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	STETINA BRUNDA GARRED & BRUCKER		
Signature			
Printed name	Kit M. Stetina		
Date	May 8, 2006	Reg. No.	29,445

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name	Josephine I. Weissberger	Date	May 8, 2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicants: Gianni Sava )  
Laura Zorzin )  
Dario Vojnovic )  
Serial No.: Unknown ) Art Unit: **Unknown**  
Filing Date: Herewith ) Examiner: **Unknown**  
For: POLYSACCHARIDE DOUBLE- )  
LAYER MICROCAPSULES AS )  
CARRIERS FOR )  
BIOLOGICALLY ACTIVE )  
SUBSTANCE ORAL )  
ADMINISTRATION )

---

**SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT  
PURSUANT TO 37 C.F.R. SECTION 1.97**

Mail Stop Amendment  
Assistant Commissioner for Patents  
Post Office Box 1450  
Alexandria, Virginia 22313-1450

Dear Sir/Madam:

Pursuant to 37 C.F.R. § 1.97, the following Supplemental Information Disclosure Statement is submitted as listed on form PTO/SB/08B enclosed herewith in duplicate. Copies of all disclosure documents are attached hereto for the Examiner's review.

No representation is made that the references disclosed herein legally constitute prior art, or that more relevant references are not available. The disclosure documents enclosed herewith and listed on the attached form PTO/SB/08B are printed in the English language and/or accompanied by an Abstract published in the English language.

The references listed herein, when taken alone or in combination, are not believed to disclose nor make obvious the invention as claimed in the subject application.

As this Supplemental Information Disclosure Statement is being submitted before the stipulated three months from the filing date of the application and/or before the mailing of a first Office Action, it is believed that no fee is required.

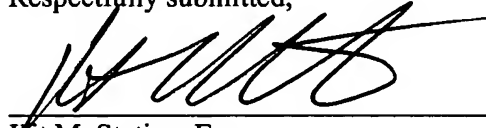
If a fee is required, please charge Account Number 19-4330.

Dated: May 8, 2006

Customer No. 007663

By:

Respectfully submitted,



Kit M. Stetina, Esq.

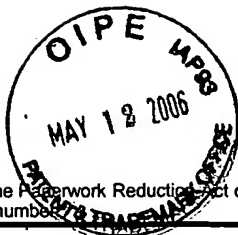
Registration No. 29,445

STETINA BRUNDA GARRED & BRUCKER

75 Enterprise, Suite 250

Aliso Viejo, CA 92656

(949) 855-1246



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Approved for use through 10/31/2002. OMB 0651-0031  
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

<b>Substitute for form 1449B/PTO</b> <b>INFORMATION DISCLOSURE</b> <b>STATEMENT BY APPLICANT</b>  (use as many sheets as necessary)  Sheet <u>1</u> of <u>0</u>		<b>Complete if Known</b>	
		Application Number	10/567.699
		Filing Date	February 2, 2006
		First Named Inventor	Gianni Sava
		Group Art Unit	Unknown
		Examiner Name	Unknown
		Attorney Docket Number	NOTAR-031US

OTHER PRIOR ART -- NON PATENT LITERATURE DOCUMENTS			
Examiner Initials*	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T <sup>2</sup>
		A. POLK, B. AMSDEN, K. DE YAO, T. PENG and M.F.A. GOOSEN; "Controlled Release of Albumin from Chitosan-Alginate Microcapsules"; Journal of Pharmaceutical Sciences; Feb. 1994; pg. 178-185; Vol. 83, No. 2	
		G.W. VANDENBERG, C. DROLET, S.L. SCOTT and J. DE LA NOUE; "Factors Affecting Protein Release from Alginate-Chitosan Coacervate Microcapsules During Production and Gastric Intestinal Simulation"; Journal of Controlled Release; Mar. 2001; pg. 297-307	
		I.M. VAN DER LUBBEN, J.C. VERHOEF, G. BORCHARD and H.E. JUNGINGER; "Chitosan for Mucosal Vaccination"; www.aapspharmaceutica.com; Mar. 2006	
		L.J. SCHEP, I.G. TUCKER, G. YOUNG, R. LEDGER and A.G. BUTT; "Controlled Release Opportunities for Oral Peptide Delivery in Aquaculture"; Journal of Controlled Release; Sept. 1998; pg. 1-14	
		A.J. AINSWORTH, C.D. RICE and L. XUE; "Immune Responses of Channel Catfish, <i>Ictalurus Punctatus</i> . . . "; CSA Illumina; Mar. 2006	

Examiner Signature		Date Considered	
--------------------	--	-----------------	--

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.